



State of New Hampshire 2004 ANNUAL REPORT

The following information shall be given as of January 1
preceeding the due date Pursuant to RSA 293-A:16.22.

REPORT DUE BY April 1, 2004

ANNUAL REPORTS RECEIVED AFTER THE DUE DATE
WILL BE ASSESSED A LATE FEE.

Filed

Date Filed: 12/10/2004

Business ID: 011976

William M. Gardner

Secretary of State

DAVID A. MENDES CONSTRUCTION CO., INC.

54 JERICHO RD

PELHAM, NH 03076

ADDRESS OF PRINCIPAL OFFICE:

54 JERICHO RD

PELHAM, NH 03076

REGISTERED AGENT AND OFFICE:

DAVID A. MENDES

JERICHO RD.

PELHAM, NH 03076

ENTITY TYPE: CORPORATION

BUSINESS ID: 011976

STATE OF DOMICILE: NH

FEDERAL ID: 020334531

CONSTRUCTION

If changing the mailing or principal office address, please check the appropriate box and fill in the necessary information.

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The new mailing address

☐

The new principal office address

PO Box is acceptable.

OFFICERS

NAME AND BUSINESS ADDRESS (P.O. BOX ACCEPTABLE).

(MUST LIST AT LEAST ONE OFFICER BELOW)

PRES **DAVID A MENDES**
STREET **54 JERICHO ROAD**
CITY/STATE/ZIP **PELHAM, NH 03076**
SEC'Y **WILLIAM J GROFF**
STREET **5 PROSPECT STREET**
CITY/STATE/ZIP **NASHUA, NH 03060**
TREAS **DAVID A MENDES**
STREET **54 JERICHO ROAD**
CITY/STATE/ZIP **PELHAM, NH 03076**
V-PRES **MARILYN P MENDES**
STREET **54 JERICHO ROAD**
CITY/STATE/ZIP **PELHAM, NH 03076**

NAMES AND ADDRESSES OF ADDITIONAL OFFICERS AND DIRECTORS ARE ATTACHED

BOARD OF DIRECTORS

NAME AND BUSINESS ADDRESS (P.O. BOX ACCEPTABLE).

(MUST LIST AT LEAST ONE DIRECTOR BELOW)

NAME **DAVID A MENDES**
STREET **54 JERICHO ROAD**
CITY/STATE/ZIP **PELHAM, NH 03076**
NAME **DAVID A MENDES**
STREET **54 JERICHO ROAD**
CITY/STATE/ZIP **PELHAM, NH 03076**
NAME **MARILYN P MENDES**
STREET **54 JERICHO ROAD**
CITY/STATE/ZIP **PELHAM, NH 03076**
NAME **PATRICK LUND**
STREET **IRIS AVENUE**
CITY/STATE/ZIP **PELHAM, NH 03076**

To be signed by an officer, director, or any other person authorized by the board of directors.

I, the undersigned do hereby Certify that the statements on this report are true to the best of my information, knowledge and belief.

Sign here:

DAVID A MENDES

Please print name and title of signer:

DAVID A MENDES

/

PRESIDENT

NAME

TITLE

FEE DUE: \$150.00

E-MAIL ADDRESS (OPTIONAL):



WHEN THIS FORM IS ACCEPTED BY THE SECRETARY OF STATE, BY LAW IT WILL BECOME A
PUBLIC DOCUMENT AND ALL INFORMATION PROVIDED IS SUBJECT TO PUBLIC DISCLOSURE

REQUIRED INFORMATION MUST BE COMPLETE OR THE REGISTRATION REPORT WILL BE REJECTED

MAKE CHECK PAYABLE TO SECRETARY OF STATE

RETURN COMPLETED REPORT AND PAYMENT TO:

New Hampshire Department of State, Annual Reports, P.O. Box 9529, Manchester, NH 03108-9529